030804

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)			ATTORNEY DOCKET 84752KNM Customer No. 01333				
So: Commissioner for Patents			Everyon Mail Label No.				
P.O. Box 1450			2_				
Alexandria, VA. 22313-1450			EV29351157	74 US		2825	
RINTABLE SHELF LABEL			Date: Ma	ul 8, 20	22390 U.S. PTO	ار از	
First Named Inventor (or	Application Ident	rifier):			223	-	
Robert G. Capurso, et al							
Enclosed are: 1. X Specification			6. X	Assignment of the	invention to		
2. 9 Sheet(s) of drawin	2. 9 Sheet(s) of drawing(s)			Eastman Kodak Company 7. Certified copy of a priority			
3. X Information Disclosure Statement Under 37 CFR 8. Associate Power of 1.97.					f Attorney		
4. Combined Declaration for 4a. X New 4b. Copy from a				u/distinis and social T) 11late A		
	prior application (3		. —				
5. <u>Incorporation by Reference (useable if Box 4b is</u> 9. <u>Deletion of Inventor(s)</u> .						_	
checked) The entire disclosure of the prior application, from Signed statement attached deleting inventor(s) named							
which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying 1.33(b).							
application and is hereby incor			1.55(0).				
			identified appli	cation, amend the	specification at Page 1	_	
	serting the following:		· · · · · · · · · · · · · · · · · · ·	,	-r	,	
CROSS REFERENCE TO RELATED APPLICATION							
Reference is made to and priority claimed from U.S. Provisional Application Serial No.,							
filed, entitled. If a CONTINUING APPLICATION, check appropriate how and supply the requisite information.							
If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: 11. Continuation Divisional Continuation-in-part (CIP) of prior application No:							
			,		M 140. ₄		
	ritten communication		•	•			
	npany, 343 State Stre						
	phone calls to Kathle	een Neuner Mar	nne at 585-722	-9225.			
The filing fee has been calculat		-14					
FOR:	NO. FILED	NO. EXTRA	RATE	FEE			
BASIC FEE TOTAL CLAIMS	50 - 20 =	30	x 18 =		\$ 770 \$ 540		
INDEPENDENT CLAIMS	2 - 3 =	-1	x 86 =		\$ 0		
MULTIPLE DEPENDEN			+ 290	- 	\$0		
			TOTA		\$ 1310		
X Please charge my Eastma				n the amount of	\$ 1310		
		py of this sheet					
X The Commissioner is hereby authorized to charge any additional filing fees required under							
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. <u>05-0225</u> .							
A duplicate copy of this sheet is enclosed.							
		LA	them A	Um /h_			
TF .11	_	0)					

Kathleen Neuner Manne/cak Telephone: 585-722-9225 Facsimile: 585-477-1148 Attorney for Applicants Registration No. 40,101